



- UNION COUNTY -
County Clerk
R. Nellie Bogue Hibbert

1001 4th Street, Suite D; La Grande, Oregon 97850
www.union-county.org nhibbert@union-county.org

Phone (541) 963-1006
Fax (541) 963-1013
Voting Information
1-866-ORE-VOTES
(1-866-673-8683)

TTY 1-800-735-1232
English/Spanish

November 15, 2005

TO: Joe Gartlitz, Manager
City of Elgin

FROM: R. Nellie Bogue Hibbert
Union County Clerk *NBH*

RE: Recall Petition

VOID
*Cannot be filed with
County Clerk*

On November 8, 2005, I faxed to you the documents that have been filed for Recall of Joe Gartlitz.

Enclosed you will find a copy of all of the documents that are in the file. As you will note, the petitioners have 90 days from October 31, 2005, to turn in 100% of the required 91 signatures for verification which is January 30, 2006. If they turn in signatures earlier than the deadline, the timeline becomes compressed.

I will keep you up to date on any further filings. If you have any questions, please give me a call.

STATEMENT OF ORGANIZATION

ORS 260.042
ORS 260.118

Designation of

Political Committee and Appointment of Treasurer and Directors

Please type or print legibly in black ink.

Primary 20____ General 20____ Other election date____ ☐ Will exist for more than one year

This filing is an: ☒ Original ☐ Amendment ☐ Discontinuation

This filing is with: ☒ Principal Filing Officer ☐ Secondary Filing Officer
(Name of Principal Filing Officer)

Name of political committee (if changing committee name, please include former name)	Abbreviation or acronym
<i>Committee to recall Joe Garlitz</i>	☐ REC'D ☐ FILED
Residence address (street/route, city, state, zip code) - no post office box numbers	OCT 11 2005
<i>660 Albany Elgin Ore 97827.</i>	☐ SENT ☐ CALLED

Name of treasurer
☐ Mr. ☒ Ms. *Eva Marie Breshears.*

Work phone number	Home phone number	Fax number	E-mail address
<i>437-2021</i>	<i>437-5015</i>	<i>—</i>	

Mailing address to which all correspondence will be sent
*P.O. Box 268
Elgin Ore 97827.*

Additional address that may be used on political publications (PO box or street/route, city, state, zip)	Campaign phone number

Type of Political Committee (mark only one box)

- | | | |
|---|---|---|
| ☒ Miscellaneous
Support or oppose one or more of the following:
• Specific candidates
• Entire ticket of a political party
• Candidate in a recall election (includes chief petitioner of recall petition)
• Multiple candidates and measures | ☐ Measure
• Chief petitioners of a statewide initiative or referendum petition
• Exclusively support or oppose one or more measures on ballot | ☐ Political Party
• A major or minor party defined in ORS chapter 248
• A committee established by a major or minor party under party bylaws (e.g., county central committee) |
|---|---|---|

Candidate Name/Party Name/Title of Measure or Petition	Support	Oppose
	☐	☐
	☐	☐
	☐	☐

Nature of political committee
Committee to Recall Joe Garlitz

Political committee intends to solicit funds by (mark all that apply):

☐ Direct mail	☒ Personal contact	☐ Radio	☐ Television
☐ Events	☐ Newspaper	☐ Website	☐ Other _____

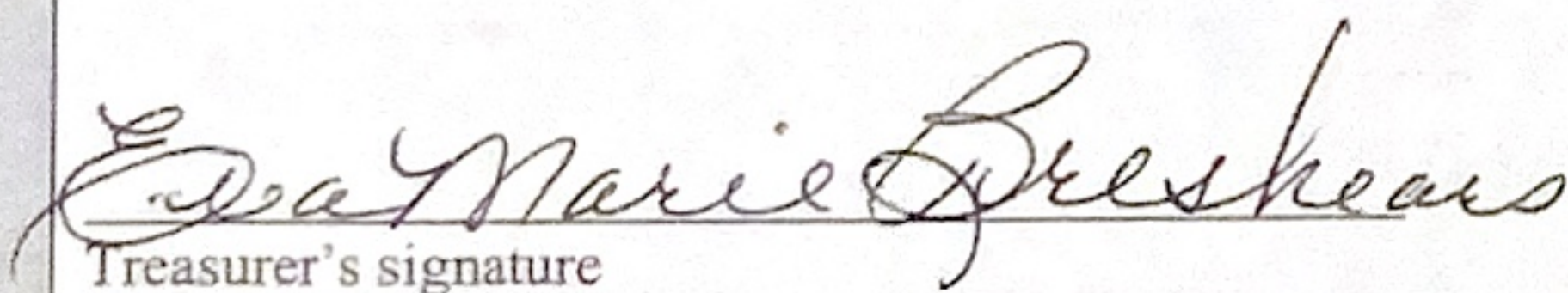
Please complete and sign the reverse side of this form.

Committee Directors/Chief Petitioners

Name	Address (including zip code)	Occupation	Phone Number

If two or more directors of this political committee are also directors of another political committee, list the names of those directors and the name and address of the other political committee.

By signing this document I acknowledge that I am personally liable for any penalties imposed under ORS chapter 260.


Treasurer's signature

10-31-05
Date signed

Instructions**Filing a new committee**

The completed form must be filed within three business days of first receiving a contribution or making an expenditure. A date stamped copy, which includes your identification number, will be returned to you as an acknowledgment of your filing.

Amending information on this form

Any change in the information on this form must be filed within ten (10) days of the change. To notify the filing officer of a change in information, submit this form, completed in its entirety, and mark the "Amendment" box.

Committee Directors/Chief Petitioners

All committees, other than chief petitioner committees, must designate at least one committee director who is not the treasurer. The treasurer may be a committee director if the treasurer meets the definition of committee director in ORS 260.005(2), but the treasurer may not be the only committee director. A chief petitioner committee must list all chief petitioners of the petition. Occupational information for chief petitioners is optional.

Discontinuing your committee

You must file a final contribution and expenditure report that shows a zero balance, along with a completed SEL 221 with the "Discontinuation" box marked. The final report may be filed at any time.

For Office Use Only

Initials _____

Committee ID Number _____

Office Number _____

STATEMENT ONE OR MORE PETITION CIRCULATORS WILL BE PAID

I/We hereby declare one or more petition circulators will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition or certificate. I/We understand the filing officer must be notified not later than the tenth day after I/we first have knowledge or should have had knowledge that no petition circulator will be paid for obtaining signatures.

Identify Petition

(Name of Candidate or Minor Political Party on Prospective Petition; or
Name of Officeholder on Recall Petition)

Signed* _____

Date signed _____

Date signed _____

Date signed _____

*Statement must be signed by one of the following:

- candidate for nomination;
- chief petitioner for recall petition;
- chief sponsor for certificate of nomination; or
- chief sponsor for minor political party formation petition.

☐ REC'D	☐ FAXED ☐
OCT 31 2005	
☐ SENT	☐ CALLED ☐

STATEMENT NO PETITION CIRCULATORS WILL BE PAID

I/We hereby declare no petition circulator will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition or certificate. I/We understand the filing officer must be notified not later than the tenth day after I/we first have knowledge or should have had knowledge that one or more petition circulators will be paid for obtaining signatures.

Petition for recall of Joe Barlitz

Identify Petition

(Name of Candidate or Minor Political Party on Prospective Petition; or
Name of Officeholder on Recall Petition)

Signed* *Lee Marie Breshears*

Date signed *10-31-05*

Date signed _____

Date signed _____

*Statement must be signed by one of the following:

- candidate for nomination;
- chief petitioner for recall petition;
- chief sponsor for certificate of nomination; or
- chief sponsor for minor political party formation petition.

PETITION FOR RECALL OF

NAME OF PUBLIC OFFICER Joe Garlitz

TITLE OF PUBLIC OFFICER The city of Elgin Administrator

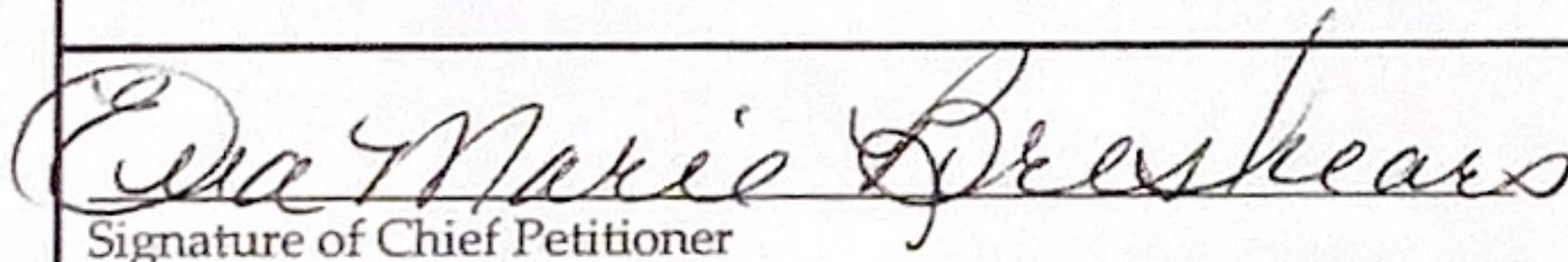
DATE PROSPECTIVE PETITION FILED October 31, 2005
(MONTH/DAY/YEAR)

PLEASE TYPE OR LEGIBLY PRINT IN BLACK INK

USE THIS SPACE FOR STATEMENT OF REASONS FOR DEMANDING RECALL. STATEMENT MAY NOT EXCEED 200 WORDS.

We are petitioning to recall the City Administrator of Elgin, Joe Garlitz. We pay taxes with faith that our monies are being used for their allotted projects. This is not entirely true. It appears that Mr. Garlitz has ignored some projects and focused his attention on one town member rather than the townspeople, who voted him into his seat. So, we ask: What is going on here? Why are projects such as Well # 2 being ignored after specific instructions to fix it in 2002? Why are we unable to view important city documents? Why is it that the supervisor of public works doesn't ensure his employees get proper certification? This has potential for injuries that would be very costly to the counsel and us. Under his supervision, a county road wasn't properly prepped for sealing and now needs to be fixed. After a County citation warning, Mr. Garlitz still didn't approve spraying to control weeds behind WC Construction. Does anyone but us see the hazard? Perhaps it is time for the counsel to further investigate our concerns. We are tired of dealing with Mr. Garlitz and we want a new City Administrator who works for the betterment of Elgin.

☐ REC'D	☐ FAXED
OCT 31 2005	
☐ SENT	☐ CALLED


Signature of Chief Petitioner

Eva Marie Breshears

Name of Treasurer of Political Committee Chief Petitioner
Represents or Chief Petitioner's Name

P.O. Box 268, Elgin, OR 97827

Address of Treasurer of Political Committee Chief Petitioner Represents or Chief Petitioner's Address – To Which All Correspondence Will Be Sent (Include Street/Route, City, State and Zip Code)

INSTRUCTIONS FOR CIRCULATORS

Only active registered voters of the public official's electoral district may sign a petition.

All signers on any one signature sheet must be active registered voters of the same county.

It is advisable to have signers use a pen for signing petitions or for certifying petitions.

Only one circulator may collect signatures on any one sheet of a petition.

Each circulator must personally witness all signatures the circulator collects.

Circulators shall not file a petition knowing it to contain a false signature.

Circulators shall not knowingly make any false statement to any person who signs it or requests information about it.

Circulators shall not attempt to obtain the signature of a person knowing that the person signing the petition is not qualified to sign it.

Circulators shall not offer money or any thing of value to another person to sign or not sign a petition.

Circulators shall not sell or offer to sell signature sheets.

Warning: Violations of the circulator requirements may result in conviction of a felony with a fine of up to \$100,000 and/or prison for up to five years.

INSTRUCTIONS FOR SIGNERS

Only active registered voters of the public official's electoral district may sign a petition. Sign your full name, as you did when you registered to vote.

Please fill in the date on which you signed the petition, your printed name and your residence address in the spaces provided.

It is advisable to use a pen for signing petitions.

It is unlawful to sign any person's name other than your own. Do not sign another person's name under any circumstances.

It is unlawful to sign a petition more than once.

It is unlawful for a person to knowingly sign a petition when the person is not qualified to sign it.

PETITION FOR RECALL OF

NAME OF PUBLIC OFFICER Joe Garlitz

TITLE OF PUBLIC OFFICER The city of Elgin Administrator

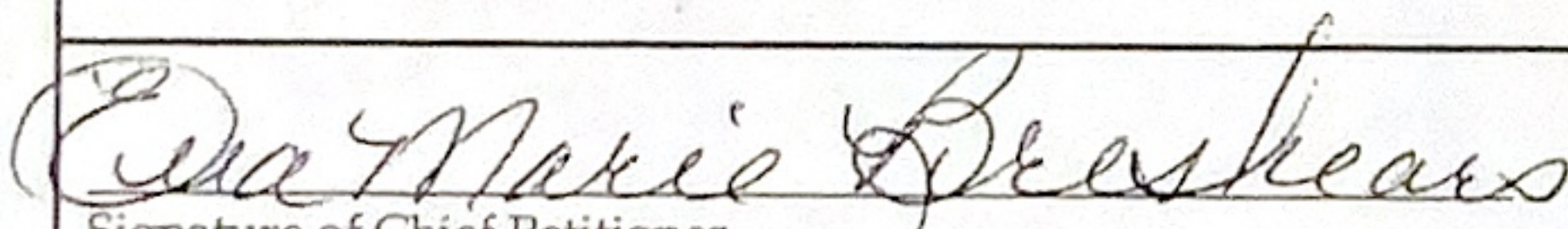
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(MONTH/DAY/YEAR)

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☐ REC'D	☐ FAXED
OCT 31 2005	
☐ SENT	☐ CALLED


Signature of Chief Petitioner

Eva Marie Breshears

Name of Treasurer of Political Committee Chief Petitioner
Represents or Chief Petitioner's Name

P.O. Box 268, Elgin, OR 97827

Address of Treasurer of Political Committee Chief Petitioner Represents or Chief Petitioner's Address - To Which All Correspondence Will Be Sent (Include Street/Route, City, State and Zip Code)

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November 3, 2005

Eva Marie Breshears
P O Box 268
Elgin OR 97827

RE: Recall Petition for Joe Garlitz

Ms Breshears:

On October 31, 2005, you filed your Petition for Recall of Joe Garlitz, City of Elgin Administrator.

I find that you have met the requirements, as Chief Petitioner, to proceed with the recall by having filed the following signed documents:

1. SEL 221 Statement of Organization/Designation of Political Committees and Appointment of Treasurer and Directors
2. SEL 350 Petition for Recall of Joe Garlitz
3. SEL 300 Statement No Petition Circulator Will be Paid
4. SEL 351 Prospective Petition with first line signed by yourself with Recall Statement printed on the back

Please review with the circulators the requirements for circulation of the petition. The petitions may not be left unattended and must be signed in the presence of the circulator. Also, please make sure that the "Recall Statement" is printed on the back of each of your petition sheets. The signatures will be invalid if they are submitted for verification without the "Recall Statement" being printed on the back of each petition.

The Recall of Joe Garlitz as City of Elgin Administrator will require the following valid signatures:

604 votes cast for Governor in 2002 x .15 = 90.6 (91 required signatures)

You must gather at least 91 valid signatures from those registered voters residing within the city limits of Elgin. I suggest that you gather at least 15% more signatures than required.

November 3, 2005

Ms. Breshears

Page 2 of 2

The time line is as follows:

Signatures due not later than:	January 30, 2006
Verification of Signatures:	February 9, 2006
(Maximum of 10 days)	
Resignation or Justification	February 14, 2006
(Five days after signature verification)	
Election held within 35 days after resignation period	March 21, 2006 (not later than)

Please do not submit signatures for verification until at least 100% of the required number of signatures have been obtained. **Only the Chief Petitioner may submit the signatures for verification.**

If you have any questions, please give me a call.

Sincerely,

R. NELLIE BOGUE HIBBERT
Union County Clerk

Committee Directors/Chief Petitioners

Name	Address (including zip code)	Occupation	Phone Number
Eva Marie Breshers	P.O. Box 268 Elgin Ore 97827	Baker/Kitchen Elgin School	437-5015
Donette Claire Winkelman	855 Palmer St Rd. Elgin OR 97827	Assistant in HS Kitchen	437-3049
Al Bush	P.O. Box 268 Elgin OR 97827	Retired	437-5015

If two or more directors of this political committee are also directors of another political committee, list the names of those directors and the name and address of the other political committee.

By signing this document I acknowledge that I am personally liable for any penalties imposed under ORS chapter 260.

Treasurer's signature

Date signed

Instructions

Filing a new committee

The completed form must be filed within three business days of first receiving a contribution or making an expenditure. A date stamped copy, which includes your identification number, will be returned to you as an acknowledgment of your filing.

Amending information on this form

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Discontinuing your committee

You must file a final contribution and expenditure report that shows a zero balance, along with a completed SEL 221 with the "Discontinuation" box marked. The final report may be filed at any time.

For Office Use Only

Initials _____

Committee ID Number _____

Office Number _____

STATEMENT OF ORGANIZATION

Designation of Political Committee and Appointment of Treasurer and Directors

Please type or print legibly in black ink.

Primary 20____ General 20____ Other election date X ☐ Will exist for more than one year

This filing is an: ☒ Original ☒ Amendment ☐ Discontinuation

This filing is with: ☐ Principal Filing Officer ☐ Secondary Filing Officer _____
(Name of Principal Filing Officer)

Name of political committee (if changing committee name, please include former name) Abbreviation or acronym

Residence address (street/route, city, state, zip code) - no post office box numbers

Name of treasurer

☐ Mr. ☒ Ms. Dea M. Breshears

Work phone number Home phone number Fax number E-mail address

437-2021 437-5015

Mailing address to which all correspondence will be sent

P.O. Box 268
Elgin Ore 97827

Additional address that may be used on political publications (PO box or street/route, city, state, zip) Campaign phone number

Type of Political Committee (mark only one box)

☒ Miscellaneous

Support or oppose one or more of the following:

- Specific candidates
- Entire ticket of a political party
- Candidate in a recall election (includes chief petitioner of recall petition)
- Multiple candidates and measures

☐ Measure

- Chief petitioners of a statewide initiative or referendum petition
- Exclusively support or oppose one or more measures on ballot

☐ Political Party

- A major or minor party defined in ORS chapter 248
- A committee established by a major or minor party under party bylaws (e.g., county central committee)

Candidate Name/Party Name/Title of Measure or Petition

Support

Oppose

Recall of Joe Garlitz

☒

☐

☐

☐

☐

☐

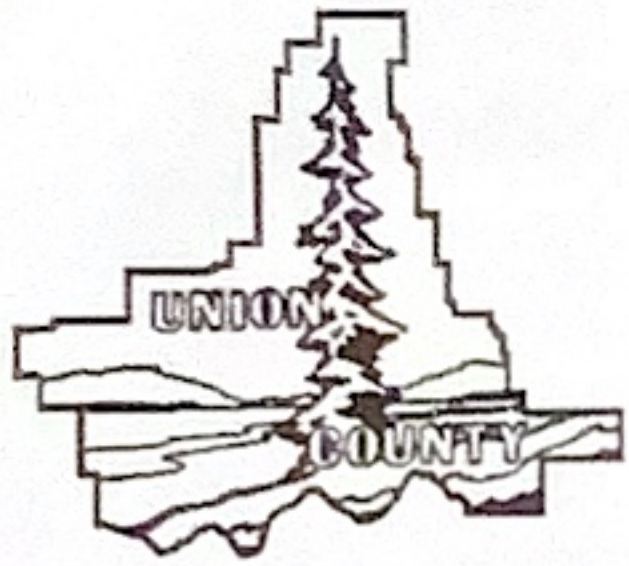
Nature of political committee

Recall petition Joe Garlitz

Political committee intends to solicit funds by (mark all that apply):

- ☐ Direct mail ☒ Personal contact ☐ Radio ☐ Television
☐ Events ☐ Newspaper ☐ Website ☐ Other _____

Please complete and sign the reverse side of this form.



TTY 1-800-735-1232
English/Spanish

- UNION COUNTY -
County Clerk
R. Nellie Bogue Hibbert

1001 4th Street, Suite D; La Grande, Oregon 97850
www.union-county.org nhibbert@union-county.org

Phone (541) 963-1006
Fax (541) 963-1013
Voting Information
1-866-ORE-VOTES
(1-866-673-8683)

December 19, 2005

Joe Garlitz, Manager
City of Elgin
P O Box 128
Elgin OR 97827

RE: Recall Petition for Joe Garlitz, Manager
City of Elgin

Dear Joe:

I am enclosing a copy of a letter sent to Eva Breshears, Chief Petitioner, for the Recall of Joe Gartliz, Manager, City of Elgin. On October 31, 2005 a petition for Recall was filed in my office. On November 3, 2005, I authorized the gathering of signatures for this recall.

As it turns out, I am not the filing officer for the City of Elgin. The City of Elgin is the proper venue for filing a city recall. Thus, the authorization to gather signatures on the recall is null and void.

All documents pertaining to a city recall for the City of Elgin, need to be filed with your office. The date recognized for signature gathering will be following your authorization to circulate signature sheets.

I have discussed this issue with Eva Breshears, Chief Petitioner. I have indicated to her, upon her request, that I would be present at the time of filing the recall in your office.

I will assist both your office and Eva Breshears in whatever manner is helpful.

Sincerely,

R. Nellie Bogue Hibbert
Union County Clerk

rn timer

cc: Eva Breshears, Chief Petitioner



- UNION COUNTY -
County Clerk
R. Nellie Bogue Hibbert

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Voting Information
1-866-ORE-VOTES
(1-866-673-8683)

TTY 1-800-735-1232
English/Spanish

December 19, 2005

Eva Marie Breshears
P O Box 268
Elgin Or 97827

RE: Recall Petition for Joe Garlitz

Ms. Breshears:

On October 31, 2005, you filed your Petition for Recall of Joe Garlitz, City of Elgin Administrator with me and on November 3, 2005, I authorized you to begin gathering signatures on the recall petition.

As it turns out, I am not the filing officer for the City of Elgin. You must file all recall documents with the City of Elgin.

The date recognized for gathering signatures will be following the authorization for circulation from the City of Elgin.

I am enclosing for you the necessary documents for filing this recall with the City of Elgin. If I may assist you in any other way, please give me a call.

Sincerely,

R. Nellie Bogue Hibbert
Union County Clerk

rn timer

cc: ✓ Joe Garlitz, Manager
City of Elgin

PETITION FOR RECALL OF

NAME OF PUBLIC OFFICER _____ TITLE OF PUBLIC OFFICER _____

DATE PROSPECTIVE PETITION FILED _____
(MONTH/DAY/YEAR)

PLEASE TYPE OR LEGIBLY PRINT IN BLACK INK

USE THIS SPACE FOR STATEMENT OF REASONS FOR DEMANDING RECALL. STATEMENT MAY NOT EXCEED 200 WORDS.

Signature of Chief Petitioner

Name of Treasurer of Political Committee Chief Petitioner
Represents or Chief Petitioner's Name

Address of Treasurer of Political Committee Chief Petitioner Represents or Chief Petitioner's Address - To Which All Correspondence
Will Be Sent (Include Street/Route, City, State and Zip Code)

INSTRUCTIONS FOR CIRCULATORS

- Only active registered voters of the public official's electoral district may sign a petition.
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 - Each circulator must personally witness all signatures the circulator collects.
 - Circulators shall not file a petition knowing it to contain a false signature.
 - Circulators shall not knowingly make any false statement to any person who signs it or requests information about it.
 - Circulators shall not attempt to obtain the signature of a person knowing that the person signing the petition is not qualified to sign it.
 - Circulators shall not offer money or any thing of value to another person to sign or not sign a petition.
 - Circulators shall not sell or offer to sell signature sheets.
- Warning:** Violations of the circulator requirements may result in conviction of a felony with a fine of up to \$100,000 and/or prison for up to five years.

INSTRUCTIONS FOR SIGNERS

- Only active registered voters of the public official's electoral district may sign a petition. Sign your full name, as you did when you registered to vote.
- Please fill in the date on which you signed the petition, your printed name and your residence address in the spaces provided.
- It is advisable to use a pen for signing petitions.
- It is unlawful to sign any person's name other than your own. Do not sign another person's name under any circumstances.
- It is unlawful to sign a petition more than once.
- It is unlawful for a person to knowingly sign a petition when the person is not qualified to sign it.

ONE OR MORE NO
(CIRCLE ONE)

PETITION CIRCULATORS WILL BE PAID

Chief Petitioner Name _____

Date _____

PETITION FOR RECALL OF _____
(NAME AND TITLE OF PUBLIC OFFICER)

SIGNATURE SHEET

Prospective Petition Filed _____
(MONTH/DAY/YEAR)

Do Not Sign This Petition More Than Once.

NOTE: A copy of the petition setting forth the reasons for demanding the recall is printed on the back of this signature sheet. (Oregon Constitution, Article II, § 18).

SIGNATURE	DATE SIGNED MO/DAY/YR	PRINT NAME	RESIDENCE ADDRESS NUMBER AND STREET	CITY AND ZIP CODE
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

CIRCULATOR'S CERTIFICATION

I hereby certify every person who signed this sheet did so in my presence and I believe each person is a qualified voter in the public official's electoral district (ORS 249.865; ORS 198.430). **Warning:** Falsely signing this statement may result in conviction of a felony with a fine of up to \$100,000 and/or prison for up to five years. (ORS 260.715).

THIS CERTIFICATION MUST BE SIGNED BY THE CIRCULATOR.

CIRCULATOR SIGNATURE _____ DATE SIGNED _____

PRINTED NAME OF CIRCULATOR _____

CIRCULATOR'S ADDRESS (street, city and zip code) _____

SHEET NUMBER _____

I hereby certify _____ signatures on this petition are those of active registered voters in _____ County, Oregon

SIGNATURE OF COUNTY ELECTION OFFICIAL _____ DATE CERTIFIED _____

STATEMENT ONE OR MORE PETITION CIRCULATORS WILL BE PAID

I/We hereby declare one or more petition circulators will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition or certificate. I/We understand the filing officer must be notified not later than the tenth day after I/we first have knowledge or should have had knowledge that no petition circulator will be paid for obtaining signatures.

Identify Petition

(Name of Candidate or Minor Political Party on Prospective Petition; or
Name of Officeholder on Recall Petition)

Signed* _____

Date signed _____

Date signed _____

Date signed _____

*Statement must be signed by one of the following:

- candidate for nomination;
- chief petitioner for recall petition;
- chief sponsor for certificate of nomination; or
- chief sponsor for minor political party formation petition.

STATEMENT NO PETITION CIRCULATORS WILL BE PAID

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Name of Officeholder on Recall Petition)

Signed* _____

Date signed _____

Date signed _____

Date signed _____

*Statement must be signed by one of the following:

- candidate for nomination;
- chief petitioner for recall petition;
- chief sponsor for certificate of nomination; or
- chief sponsor for minor political party formation petition.

**CERTIFICATE
of
LIMITED CONTRIBUTIONS AND EXPENDITURES**

I do hereby certify that I expect neither the aggregate contributions nor the aggregate expenditures to total more than \$2,000 for this election. If at any time during the campaign for this election, either the total contributions or total expenditures exceed \$2,000, I understand that I must file detailed statements of contributions and expenditures (SEL 230 231, 232, 233 and 234). The filed detailed statement of contributions and expenditures shall reflect (beginning with the start of the first reporting period) all contributions received and expenditures made by or on behalf of my principal campaign committee to the last date of the accounting period in which my aggregate contributions or expenditures exceed \$2,000.

Candidate's Signature

Date Signed

INSTRUCTIONS

This certificate of limited contributions and expenditures may only be used if the candidate does not expect to receive nor to expend more than \$2,000 (aggregate) during this election period. If the candidate does or expects to receive more than \$2,000 (aggregate), then the candidate must file detailed C & E reports (SEL 230, 231, 232, 233, 234).

Local candidates must itemize contributions over \$50.

PETITION FOR RECALL OF

NAME OF PUBLIC OFFICER Joe GarlitzTITLE OF PUBLIC OFFICER The city of Elgin AdministratorDATE PROSPECTIVE PETITION FILED October 31, 2005
(MONTH/DAY/YEAR)

PLEASE TYPE OR LEGIBLY PRINT IN BLACK INK

USE THIS SPACE FOR STATEMENT OF REASONS FOR DEMANDING RECALL. STATEMENT MAY NOT EXCEED 200 WORDS.

We are petitioning to recall the City Administrator of Elgin, Joe Garlitz. We pay taxes with faith that our monies are being used for their allotted projects. This is not entirely true. It appears that Mr. Garlitz has ignored some projects and focused his attention on one town member rather than the townspeople, who voted him into his seat. So, we ask: What is going on here? Why are projects such as Well # 2 being ignored after specific instructions to fix it in 2002? Why are we unable to view important city documents? Why is it that the supervisor of public works doesn't ensure his employees get proper certification? This has potential for injuries that would be very costly to the counsel and us. Under his supervision, a county road wasn't properly prepped for sealing and now needs to be fixed. After a County citation warning, Mr. Garlitz still didn't approve spraying to control weeds behind WC Construction. Does anyone but us see the hazard? Perhaps it is time for the counsel to further investigate our concerns. We are tired of dealing with Mr. Garlitz and we want a new City Administrator who works for the betterment of Elgin.

☐ REC'D ☐ FAXED ☐☐ SENT ☐ CALLED ☐

Signature of Chief Petitioner

Iva Marie Breshears

Name of Treasurer of Political Committee Chief Petitioner
Represents or Chief Petitioner's Name

P.O. Box 268, Elgin, OR 97827

Address of Treasurer of Political Committee Chief Petitioner Represents or Chief Petitioner's Address - To Which All Correspondence
Will Be Sent (Include Street/Route, City, State and Zip Code)

INSTRUCTIONS FOR CIRCULATORS

Only active registered voters of the public official's electoral district may sign a petition.
All signers on any one signature sheet must be active registered voters of the same county.
It is advisable to have signers use a pen for signing petitions or for certifying petitions.
Only one circulator may collect signatures on any one sheet of a petition.
Each circulator must personally witness all signatures the circulator collects.
Circulators shall not file a petition knowing it to contain a false signature.
Circulators shall not knowingly make any false statement to any person who signs it or requests information about it.
Circulators shall not attempt to obtain the signature of a person knowing that the person signing the petition is not qualified to sign it.
Circulators shall not offer money or any thing of value to another person to sign or not sign a petition.
Circulators shall not sell or offer to sell signature sheets.
Warning: Violations of the circulator requirements may result in conviction of a felony with a fine of up to \$100,000 and/or prison for up to five years.

INSTRUCTIONS FOR SIGNERS

Only active registered voters of the public official's electoral district may sign a petition. Sign your full name, as you did when you registered to vote.
Please fill in the date on which you signed the petition, your printed name and your residence address in the spaces provided.
It is advisable to use a pen for signing petitions.
It is unlawful to sign any person's name other than your own. Do not sign another person's name under any circumstances.
It is unlawful to sign a petition more than once.
It is unlawful for a person to knowingly sign a petition when the person is not qualified to sign it.

Committee Directors/Chief Petitioners			
Name	Address (including zip code)	Occupation	Phone Number
Eve Marie Breshers	P.O. Box 268 Elgin Ore 97827	Baker/Kitchen Elgin School	437-5015
Nanette Clau Winkelman	855 Palmer Rd. Elgin OR 97827	Assistant in HS Kitchen	437-3049
Phil Breshers	PO Box 268 Elgin OR 97827	Retired	437-5015

If two or more directors of this political committee are also directors of another political committee, list the names of those directors and the name and address of the other political committee.

By signing this document I acknowledge that I am personally liable for any penalties imposed under ORS chapter 260.

Treasurer's signature

Date signed

Instructions

Filing a new committee

The completed form must be filed within three business days of first receiving a contribution or making an expenditure. A date stamped copy, which includes your identification number, will be returned to you as an acknowledgment of your filing.

Amending information on this form

Any change in the information on this form must be filed within ten (10) days of the change. To notify the filing officer of a change in information, submit this form, completed in its entirety, and mark the "Amendment" box.

Committee Directors/Chief Petitioners

All committees, other than chief petitioner committees, must designate at least one committee director who is not the treasurer. The treasurer may be a committee director if the treasurer meets the definition of committee director in ORS 260.005(2), but the treasurer may not be the only committee director. A chief petitioner committee must list all chief petitioners of the petition. Occupational information for chief petitioners is optional.

Discontinuing your committee

You must file a final contribution and expenditure report that shows a zero balance, along with a completed SEL 221 with the "Discontinuation" box marked. The final report may be filed at any time.

For Office Use Only

Initials _____

Committee ID Number _____

Office Number _____

SEL 221
Rev. 11/03ORS 260.042
ORS 260.118

STATEMENT OF ORGANIZATION

Designation of

Political Committee and Appointment of Treasurer and Directors

Please type or print legibly in black ink.

Primary 20_____	General 20_____	Other election date ☒ _____	☐ Will exist for more than one year
This filing is an: ☒ Original		☒ Amendment ☐ Discontinuation	
This filing is with: ☐ Principal Filing Officer		☐ Secondary Filing Officer _____ (Name of Principal Filing Officer)	
Name of political committee (if changing committee name, please include former name)		Abbreviation or acronym	
Residence address (street/route, city, state, zip code) - no post office box numbers			
Name of treasurer ☐ Mr. ☒ Ms. <u>Cora M. Breshears</u>			
Work phone number <u>437-2021</u>	Home phone number <u>437-5015</u>	Fax number	E-mail address
Mailing address to which all correspondence will be sent <u>P.O. Box 268</u> <u>Elgin Ore 97827</u>			
Additional address that may be used on political publications (PO box or street/route, city, state, zip)		Campaign phone number	

Type of Political Committee (mark only one box)		
☒ Miscellaneous Support or oppose one or more of the following: • Specific candidates • Entire ticket of a political party • Candidate in a recall election (includes chief petitioner of recall petition) • Multiple candidates and measures	☐ Measure • Chief petitioners of a statewide initiative or referendum petition • Exclusively support or oppose one or more measures on ballot	☐ Political Party • A major or minor party defined in ORS chapter 248 • A committee established by a major or minor party under party bylaws (e.g., county central committee)
Candidate Name/Party Name/Title of Measure or Petition	Support	Oppose
<u>Recall of Joe Barkley</u>	☒	☐
	☐	☐
	☐	☐
Nature of political committee <u>Recall petition Joe Barkley</u>		
Political committee intends to solicit funds by (mark all that apply):		
☐ Direct mail	☒ Personal contact	☐ Radio
☐ Events	☐ Newspaper	☐ Website
		☐ Television
		☐ Other _____

Please complete and sign the reverse side of this form.

STATEMENT ONE OR MORE PETITION CIRCULATORS WILL BE PAID

I/We hereby declare one or more petition circulators will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition or certificate. I/We understand the filing officer must be notified not later than the tenth day after I/we first have knowledge or should have had knowledge that no petition circulator will be paid for obtaining signatures.

Identify Petition

(Name of Candidate or Minor Political Party on Prospective Petition; or
Name of Officeholder on Recall Petition)

Signed* _____

Date signed _____

Date signed _____

Date signed _____

*Statement must be signed by one of the following:

- candidate for nomination;
- chief petitioner for recall petition;
- chief sponsor for certificate of nomination; or
- chief sponsor for minor political party formation petition.

☐ REC'D ☐ FAXED ☐

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☐ SENT ☐ CALLED ☐**STATEMENT NO PETITION CIRCULATORS WILL BE PAID**

I/We hereby declare no petition circulator will be paid money or other valuable consideration for obtaining signatures of active registered voters on the attached petition or certificate. I/We understand the filing officer must be notified not later than the tenth day after I/we first have knowledge or should have had knowledge that one or more petition circulators will be paid for obtaining signatures.

Petition for recall of Joe Baritz

Identify Petition

(Name of Candidate or Minor Political Party on Prospective Petition; or
Name of Officeholder on Recall Petition)

Signed* *Joe Baritz*Date signed *10-31-05*

Date signed _____

Date signed _____

*Statement must be signed by one of the following:

- candidate for nomination;
- chief petitioner for recall petition;
- chief sponsor for certificate of nomination; or
- chief sponsor for minor political party formation petition.